



State of California
Department of Industrial Relations
Division of Apprenticeship Standards



Electrician Certification Program

REQUEST FOR REPLACEMENT CERTIFICATION CARD

OR REPORT OF ADDRESS CHANGE

Name: Last: _____ First: _____ Initial: _____

Card #: E-_____ - _____ E-_____ - _____ E-_____ - _____ (print affected card numbers)

Drivers License #: _____ D/L State: _____ Birthdate: ____/____/____
MM DD YYYY

Please PRINT or type all information in INK

Mailing Address: _____

City: _____ County: _____

State: _____ Zip: _____ - _____

Day Phone: _____ / _____ - _____ Evening Phone: _____ / _____ - _____

Check one box Only:

- 1 ☐ Address / phone change only (No name change) – Information is above – No new card – No fee
- 2 ☐ Mistake / Misprint on card – Replace with changes indicated below – No fee if approved
- 3 ☐ Lost / Stolen card – Replace with duplicate – Fee is \$30.00 for each card, payable as below
- 4 ☐ Name Change – Replace with new name below – Fee is \$30.00 for each card, payable as below

Name on card is wrong – Correct / New name is: _____

Certificate start or end date(s) wrong – Should be: _____

☐ Also check this box if Address has changed (for boxes 2, 3, 4)

Note - You also need to attach to this request:

If box 1 is checked, just sign, date, and mail this form.

If box 2 or 4 is checked, attach the current card(s) with the incorrect information.

If box 3 or 4 is checked, attach payment totaling \$30 for each card (non-refundable).

Exact payment by check or money order must be payable to 'DIR – Electrician Certification Fund'.

Signature: _____ Date: _____

I certify under penalty of perjury that all statements and attachments are true and correct.

Keep a copy of this signed request and all attachments for your records.

Incomplete or inaccurately paid requests will NOT be approved.

Mail this completed form with all required attachments to:

Division of Apprenticeship Standards

Attn: Electrician Certification Unit

PO Box 420603

San Francisco, CA 94142-0603

(For Office Use) Approved by: _____ Date: _____ Form DAS-ECF2 (09/2003)